

NOTICE 39 /dt. 3/1/19

All the staff members who had been appointed as Confidential duty as per this office Order No.4851 dtd.3.12.2018 for Winter 2018 Examination from 3.12.2018 to 24.12.2018 are requested to submit their reports to the undersigned in the format given below on or before 10.01.2018 positively, failing which necessary action shall be initiated against them.

**FORMAT**

**Bank Details of the beneficiary/ employee/ vendors/ payee etc.**

Sl. No.	Beneficiary Name	Account Type	IFS Code	Beneficiary's Bank Account No.

I hereby request the Drawing & Disbursing Officer of SCTE&VT to electronically credit my entitlements/ claim to the Bank Account and other details furnished above, which are true and correct to the best of my knowledge.

Signature.....

(Name):

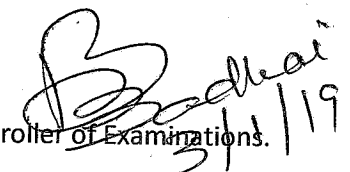
Designation:

Address:

Contact Number:

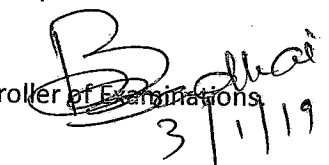
e-mail ID:

Mobile No.

  
Controller of Examinations.

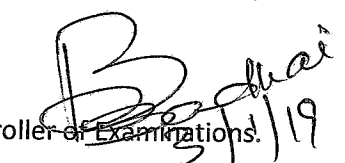
Memo No. 40(2)/dt. 3/1/19

Copy to person concerned/ Concerned Principal for information and necessary action.

  
Controller of Examinations.

Memo No. 41(2)/dt. 3/1/19

Copy to Secretary, SCTE&VT/ Section Officer (Acct.) SCTE&VT, Odisha for information and necessary action.

  
Controller of Examinations.